

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m-g</i>		6/14/00
O.I.P.E. CLASSIFIER		10	6-20-00
FORMALITY REVIEW	<i>NE</i>	553	8/1/00
RESPONSE FORMALITY REVIEW	<i>Ray</i>	54667	8/14/00

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Claim	Final	Original	Date
1	✓	✓	1/14/03
2	✓	✓	2/13/04
3	✓	✓	2/13/04
4	✓	✓	2/13/04
5	✓	✓	2/13/04
6	✓	✓	2/13/04
7	✓	✓	2/13/04
8	✓	✓	2/13/04
9	✓	✓	2/13/04
10	✓	✓	2/13/04
11	✓	✓	2/13/04
12	✓	✓	2/13/04
13	✓	✓	2/13/04
14	✓	✓	2/13/04
15	✓	✓	2/13/04
16	✓	✓	2/13/04
17	✓	✓	2/13/04
18	✓	✓	2/13/04
19	✓	✓	2/13/04
20	✓	✓	2/13/04
21	✓	✓	2/13/04
22	✓	✓	2/13/04
23	✓	✓	2/13/04
24	✓	✓	2/13/04
25	✓	✓	2/13/04
26	✓	✓	2/13/04
27	✓	✓	2/13/04
28	✓	✓	2/13/04
29	✓	✓	2/13/04
30	✓	✓	2/13/04
31	✓	✓	2/13/04
32	✓	✓	2/13/04
33	✓	✓	2/13/04
34	✓	✓	2/13/04
35	✓	✓	2/13/04
36	✓	✓	2/13/04
37	✓	✓	2/13/04
38	✓	✓	2/13/04
39	✓	✓	2/13/04
40	✓	✓	2/13/04
41	✓	✓	2/13/04
42	✓	✓	2/13/04
43	✓	✓	2/13/04
44	✓	✓	2/13/04
45	✓	✓	2/13/04
46	✓	✓	2/13/04
47	✓	✓	2/13/04
48	✓	✓	2/13/04
49	✓	✓	2/13/04
50	✓	✓	2/13/04

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)